

ITEMIZED BUDGET – SALARIES AND EMPLOYEE BENEFITS

SUB-GRANT NUMBER G-DPA-05-04

Applicant	Program Manager			
<b>SALARIES</b> – STAFF POSITION:	HOURS PER WEEK	% OF TIME ON PROJECT	ANNUAL SALARY	AMT. REQUESTED FROM VDSS
1.				
2.				
3.				
4.				
5.				
6.				
<b>TOTAL SALARIES REQUESTED FROM VDSS</b>	-----	----- -	-----	

<b>EMPLOYEE BENEFITS -</b> NAME OF BENEFIT	STAFF POSITION (# ABOVE)	% OR RATE	ANNUAL COST	AMT. REQUESTED FROM VDSS
FICA				
PENSION/RETIREMENT				
HEALTH INSURANCE				
WORKER'S COMPENSATION				
UNEMPLOYMENT				
OTHER (SPECIFY)				
<b>TOTAL EMPLOYEE BENEFITS REQUESTED FROM DSS</b>	-----	-----	-----	

# ITEMIZED BUDGET – OTHER PROPOSED EXPENSES

SUB-GRANT NUMBER G-DPA-05-04

Applicant\_\_\_\_\_Program Manager\_\_\_\_\_

LINE ITEM	JUSTIFICATION (How costs were determined)	PROPOSED VDSS FUNDS
<b><i>POSTAGE TOTAL</i></b>		
Administrative		
Program		
<b><i>PRINTING TOTAL</i></b>		
Administrative		
Program		
<b><i>CONSUMABLE SUPPLIES TOTAL</i></b>		
Office		
Program		
<b><i>TRAVEL TOTAL</i></b>		
Administrative		
Program		

ITEMIZED BUDGET – OTHER PROPOSED EXPENSES (Page 2)

SUB-GRANT NUMBER G-DPA-05-04

Applicant\_\_\_\_\_

Program Manager\_\_\_\_\_

LINE ITEM	JUSTIFICATION (How costs were determined)	PROPOSED VDSS FUNDS
OTHER*		
OTHER		
OTHER		
OTHER		
OTHER		
OTHER		
OTHER		
OTHER		
TOTAL		

\*Please specify budget item.